



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare &
Medicaid Services

Refer to DMCH: SJ

Region II
Federal Building
26 Federal Plaza
New York, N.Y. 10278

February 9, 2011

Jason A. Helgeson
State Medicaid Director
Deputy Commissioner
New York State Department of Health
Corning Tower, Empire State Plaza
Albany, New York 12237

Dear Commissioner Helgeson:

This is to notify you that New York State Plan Amendment (SPA) #08-40 has been approved for adoption into the State Medicaid Plan with an effective date of October 1, 2008. The SPA provides for supplemental payments to qualifying diagnostic and treatment center (D&TC) providers, for additional costs associated with the operation of electronic health record systems. The SPA also extends the supplemental payments made to qualifying dental clinic providers sponsored by a university or dental school.

This SPA approval consists of 5 Pages. As New York has requested, we are approving the following Attachment 4.19B Pages which were submitted with the State's December 10, 2010 electronic submission to the CMS SPA Mailbox: Page 2(c)(ii), 2(c)(iii), 2(c)(iii)(a), 2(c)(iii)(b), and 2(c)(iii)(c). These Pages replace the Attachment 4.19-B-Page 2(c)(ii), 2(c)(iii) and 2(c)(iii)(a), which were provided with the State's original June 30, 2008 SPA submission. The newly submitted Attachment 4.19B-Page 2(c)(iii)(b) and 2(c)(iii)(c) were not provided in the original SPA submission.

This amendment satisfies all of the statutory requirements at sections 1902(a)(13) and (a)(30) of the Social Security Act, and the implementing regulations at 42 CFR 447.250 and 447.272. Enclosed are copies of SPA #08-40 and the HCFA-179 form, as approved. If you have any questions or wish to discuss this SPA further, please contact Michael Melendez or Shing Jew of this office. Mr. Melendez may be reached at (212) 616-2430, and Mr. Jew's telephone number is (212) 616-2426.

Sincerely,

/s/

Michael J. Melendez
Acting Associate Regional Administrator
Division of Medicaid and Children's Health

Enclosure: SPA #08-40
HCFA-179 Form

CC: JUlberg
PMossman
KKnuth
SGaskins
RWeaver
LTavener
PMarra
MSamuel
SJew